November 19, 2005

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TRANSMITTAL FORM	Application Number Filing Date First Named Inventor	PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 atent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ection of information unless it displays a valid OMB control number. 10/765,536  January 27, 2004  Thomas M. BAER
(to be used for all correspondence after initial file  Total Number of Pages in This Submission 13	Attorney Docket Number	3742 Thor S. CAMPBELL ARC012010100
Fee Transmittal Form 1 page Fee Attached  Amendment/Reply 9 pages After Final Affidavits/declaration(s)  Extension of Time Request 1 page Express Abandonment Request Information Disclosure Statement  Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Ac Terminal Disclaimer Request for Refund  CD, Number of CD(s) Landscape Table on CD  Remarks	After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information
	URE OF APPLICANT, ATTOR	NEY, OR AGENT
Signature Lukas IP Group		
Printed name Rimas T. Lukas  Date November 19, 2005	T Re	eg. No. 146 454

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46.451

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PTO/SB/17 (12-04v2)  Approved for use through 07/31/2006. OMB 0651-0032  U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  Under the Raperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							
Effective on 12/08/2004.  Grauant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005			Complete if Known				
		■ Application Nun	Application Number 10/765,536				
		Filing Date			1		
		First Named Inv		BAER			
		Examiner Name	e	Thor S. CAMPBELL			
Applicant claims small entity status. See 37 CFR 1.27		Art Unit		3742			
TOTAL AMOUNT OF PA	YMENT (\$)	) 560	Attorney Docke	t No.	ARC012010100		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number:  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEA  Application Type Utility Design Plant Reissue	FILING		ARCH FEES    Small Entity     Fee (\$)     250     50     150	EXAM Fee 1 200 130 160 600	100 65 80	Fees Paid (\$)	
Provisional	200	100	0	0	0		
2. EXCESS CLAIM FE  Fee Description  Each claim over 20  Each independent cl  Multiple dependent  Total Claims  - 20 or HP =  HP = highest number of tot  Indep. Claims  - 3 or HP =  HP = highest number of inde  3. APPLICATION SIZE  If the specification and listings under 37 (  sheets or fraction total Sheets  - 100 =	(including R aim over 3 (claims  Extra Claim  2 al claims paid for Extra Claim ependent claims  FEE d drawings of CFR 1.52(e)) thereof. See Extra Shee	Reissues)  (including Reissues)  ms	ee Paid (\$) 50 ee Paid (\$) caper (excluding efee due is \$250 (\$	electroni \$125 for 16(s).	Fee (\$) 50 200 360 Multiple De Fee (\$)  cally filed sequer small entity) for	each additional 50	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge):							

SUBMITTED BY Registration No. (Attorney/Agent) 46,451 Telephone 415-641-7500 Signature Tolus Name (Print/Type) Rimas T. Lukas Date November 19, 2005

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